## Amendments to the Specification:

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Please replace the paragraph starting at page 7, line 1, and ending at page 7, line 2, with the following amended paragraph:

Fig. 7 Figs. 7.1, 7.2, and 7.3 is a are schematic diagram diagrams of the coupler as compressed in the conical-shaped device and the coupler after its release from the conical device;

Please replace the paragraph starting at page 13, line 22, and ending at page 14, line 19, with the following amended paragraph:

The third elongated instrument preferably is or includes thoracic catheter 80, Fig. 6 and is inserted within the graft. A coupler is preferably placed on each end of the graft. This coupler can be at least one prong, at least one staple, at least one pin, at least one barb, or any combination thereof. One example of such coupler is coupler 75. Coupler 75 may be deformable, may contain biocompatible sealants, and/or may include at least one sharp prong. In the preferred embodiment, the prongs or distal end 76 of coupler 75 attaching to the coronary artery and to the aorta, for instance, expand to an external diameter of 5 to 10 mm. Other sizes can be used. More preferably, coupler 75 may include a ring of fine wire or other material that can be compressed in a spring-like manner. First coupler 75 is most preferably a compressible ring. Ring 120, Fig. 7 Fig. 7.1, expands within the lumen and conforms to the internal geometry of the vessel upon its release from a conical-shaped device and is shown at 125, Fig. 7 Figs. 7.2 and 7.3. A conical-shaped device can be any device that includes reduced or tapered ends and that can enter into an artery or the aorta. In one embodiment of the present invention, the coupler at each end of the graft can be deformable, and preferably made of Nitinol or stainless steel, polyimide, other super-elastic alloys, and the like. More preferably, the coupler at each end of the graft includes a ring that connects to the graft by means of arms of distensible wire to which

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are attached barbs or other means of penetrating the graft wall. Ring 120, Fig. 8, preferably is within conical-shaped device 95, which is located at each end of the graft 110. In the present invention, it is preferable to compress ring 120 into conical-shaped device 95 at the exterior of the patient's thoracic region. In one example, conical-shaped device 95 may be integrated into each end of graft 110 and a ring, fine wire or other material can be compressed in conical-shaped device 95.

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**Amendments to the Drawings:** 

The attached sheet of drawings includes changes to Fig. 7. This sheet, which includes Figs. 6,

7.1, 7.2, and 7.3 replaces the original sheet including Figs. 6 and 7. The original Fig. 7 referred

to three figures, which have now been designated as Figs. 7.1, 7.2 and 7.3.

Attachment:

Replacement Sheet

Annotated Sheet Showing Changes

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